Case 17-16854-elf Doc 39

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Desc Main 05/13/2018 07:23:13am

Fill in this information to identify your case:									
Debtor 1 Ashim		Sesay							
	First Name	Middle Name	Last Name		Che	ck if this is:			
Debtor 2				_	7	An amended filing			
(Spouse, if filing)	First Name	Middle Name	Last Name		V	7 in amondou ming			
United States Bank	cruptcy Court for the:	EASTERN DIST. OF PENNSYLVANIA		<u> </u>		A supplement showing postpetition chapter 13 income as of the following date:			
Case number	17-16854					chapter 13 income as of the following date			
(if known)						MM / DD / YYYY			
Official Form 1	വല								

Official Form 1061

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Р	art 1:	Describe Emple	oyment								
1.	Fill in your employment information.			Deb	tor 1			Debtor 2 or	non-filing sp	ous	e
If you have more than one job, attach a separate page with information about		ch a separate page	Employment status	I				☐ Employed ☐ Not employed			
	additional employers.		Occupation	residential advisor							
	Include part-time, seasonal, or self-employed work.		Employer's name	KenCrest Services							
•		ion may include or homemaker, if it	Employer's address	960A Harvest Dr, Ste 100			Number Street				
	applies.	,									
				Blu	e Bell	PA	19422-190				
				City		State	Zip Code	City	Sta	te	Zip Code
			How long employed th	here?	2 yrs		_				_
			4.84								

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$1,345.50		
3.	Estimate and list monthly overtime pay.	3. +	\$0.00		
4.	Calculate gross income. Add line 2 + line 3.	4.	\$1,345.50		

Debtor 1 Ashim Sesav 17-16854 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$1,345.50 List all payroll deductions: \$156.00 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d \$18.40 5e. Insurance 5e. \$0.00 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. 5h. Other deductions. \$8.67 5h.+ Specify: city wage tax Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$183.07 5g + 5h.7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. **\$1,162.43** List all other income regularly received: 8a. Net income from rental property and from operating a 8a. \$400.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a 8c. \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. 8h. 🚣 Specify: tax refund \$380.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. \$780.00 Calculate monthly income. Add line 7 + line 9. 10. \$1,942.43 \$1,942.43 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$1,942.43 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? Debtor will be able to afford the step plan since he will have a Room Mate contributing to house hold income as of September 1, 2018. Yes. Explain:

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Debtor 1	Ashim Sesay		Case number (if known)	17-16854	
8a. Attach	ed Statement (Debtor 1)				
		Sesay Transportation			
Gross Mo	onthly Income:				\$1,800.00
Expense		Category	Amount	-	
auto and i	medalion lease		\$1,000.00 \$400.00		
Total Moi	nthly Expenses				\$1,400.00
Net Mont	hly Income:				\$400.00

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